

can he hire land for some one else to develop and expect to see his money again.

On the other hand, anyone can go there and add five years to his life by so doing, and immeasurably to his happiness, for the old Spaniard was not mistaken; the "Fountain of Youth" really exists in Florida and I have drunk of its water. Would that every one of you might do the same!

Massachusetts Anti-Tuberculosis League.

THIRD ANNUAL MEETING, BOSTON,
APRIL 10, 1917.

INTRODUCTORY REMARKS BY THE PRESIDENT.

BY VINCENT Y. BOWDITCH, M.D., BOSTON.

WE come together today for our annual meeting under conditions which bring up weighty questions to each individual, to determine in which direction duty lies in the endeavor to serve our country best in the crisis now before her. May I give my personal conviction, after perplexing doubts which must naturally arise at such a time?

I feel very strongly that those of us who are working in special lines should not relax in our present efforts or change our form of work, unless special calls come, which make it imperative to take up what seems a larger duty. The conditions to which we are now giving our time and energy will not change so much for the better that they can be left to chance, and, in my opinion, if we continue the great fight against disease and stick to our posts, we serve our country as faithfully as those whose efforts have to be directed into other paths in consequence of sudden and great emergencies. I sincerely hope that in the coming months there will be no lessening in the number of those who have already done so much to make the work of our League so far of great value to our State.

Since our second annual meeting, in April, 1916, the attention of the public has been called to conditions on the other side of the Atlantic, especially in France, which make us realize that the older country is far behind our own in the handling of tuberculosis, especially since the appalling increase of the disease consequent upon war conditions there. The impossibility of coping with it adequately without sufficient aid from us is, moreover, painfully evident. It is gratifying to the sense of pride in our own work that France is turning to us now to learn the proper methods of treatment and prevention. The fact that through the Rockefeller Foundation, the man most eminently fitted for the position—Dr. Herman F. Biggs of New York—was sent abroad to study the tuberculo-

sis question in France and to give his valuable aid in combating the disease, is proof of the respect which is felt for the work of America in these directions. These facts stand as an inspiration to us for continued and increasing endeavor in our special work.

The urgent calls for aid from Mrs. Edith Wharton in establishing proper hospitals and sanatoria for the afflicted soldiers in France, and the equally urgent appeals from Mrs. Post for the formation of dispensaries in Normandy and Brittany, should receive generous response from our own countrymen. Those of us who are working here on these special lines do not begrudge one iota of the large sums of money which are sent to sufferers abroad, and we cordially endorse these appeals. At the same time, we realize that the work necessary in our own country should not, must not, suffer in consequence of the need abroad. The terrible ravages of tuberculosis have not at present, perhaps, what may be called the sensational features of those on the other side of the Atlantic, but we all know and should let others know that we have still a tremendous problem before us here, and there must be no lessening—rather an increase—of the realization of this fact in our own great and wealthy country. Private institutions here are suffering for lack of funds in consequence of this great war and because of the natural and deep interest of our citizens in the welfare of a nation to which we owe so much for its aid to us in the past; but we have wealth enough to meet the needs of both.

With these statements as a preamble, let us turn to the specific work of our Association during the past year in contributing its share of support to various important measures. Since our last meeting, the act to provide for the construction by counties of tuberculosis hospitals for cities and towns having less than 50,000 inhabitants, has been passed and has become a law. The bill introduced by the State Department of Health has received active support in the discussions upon the subject by the representatives of the League,—chiefly by our efficient executive secretary, Mr. Stone, who has acted also as mouthpiece for our various committees.

Support has also been given by the League to two bills before the Legislature on the very important subject, "The Care of the Incurable Consumptive." One bill, making provision for the removal of offenders from surroundings in which they are a source of danger, is at present under favorable discussion; the other, which provides means to establish a suitable special hospital or place of detention for such delinquents, has not met with success this year—a fact which calls for further and persistent effort on the part of our members to impress the community with the importance of these measures. Massachusetts is still somewhat behind other states in this special matter. It should not remain so longer.

The reporting of cases of tuberculosis by phy-

sicians to the local and state boards of health is still far from what it should be. Although there has been undoubted improvement in this regard, statistics prove that there still exists great laxity in obedience to the law requiring physicians to report all cases. Nothing is more demoralizing to a community than disregard and contempt of laws which are made for the protection of the health of all. Constant watch is, therefore, necessary in such matters to see that laws are enforced. There has been a very marked improvement in recent years, since the anti-spitting laws were made. This is especially notable in our railroad and trolley cars, except in the smoking compartments, which are often in a disgraceful condition. Spitting upon the platforms and sidewalks, however, is still rife in most communities and demands a more rigid enforcement of law. A few arrests for misdemeanors have had in times past a wonderfully beneficial effect, which, however, gradually lessens as those in authority relax in their vigilance. Our tuberculosis societies and members of our League still have much missionary work to do in all these matters.

We have every reason for encouragement in our work. Dogged persistence is the only way to accomplish the desired end. We are having constant proofs of the decline in the death rate from tuberculosis, but a complacent optimism on the subject is not going to bring success. Only by united effort such as can be accomplished by the societies which form our League, can we hope to get control of the disease.

In this connection, I am glad to call special attention to the interesting experiment now being made by the Metropolitan Life Insurance Company of New York, which has established a "Community Health Station" in Framingham, Mass. That a Massachusetts town should have been selected for this is most gratifying, and there is promise of deeply interesting results which may be much more far-reaching throughout our country than we now dream. We are fortunate in having with us today Dr. Donald Armstrong, who has this experiment in charge. This work will offer an excellent opportunity for study to the members of our League so far as it touches the question of tuberculosis.

How much has been accomplished during the year in regard to the after-care of consumptive patients who have been discharged from sanatoria,—a subject of paramount importance,—we shall learn in a paper to be given today by Miss Billings.

It cannot be reiterated too often, that however successful we may be in establishing sanatoria, hospitals, and dispensaries or whatever for the cure and treatment of tuberculous patients, we must constantly keep in mind the still greater importance of preventive measures. We know that improper housing, poor accommodations in factories, and impure milk are prolific causes for the production of the disease. Persistent work in our ever-increasing attempts to remedy

these evils will, we have every reason to hope, result in a still greater decrease in the mortality of this disease in the coming years.

TUBERCULOSIS IN DAIRY CATTLE.

BY CURTIS M. HILLIARD, BOSTON,

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TUBERCULOSIS in cattle has been more or less neglected by anti-tuberculosis societies because of its relatively low incidence in humans compared with the human type of infection. On the other hand, the fact that the occurrence of bovine tuberculosis in man is absolutely preventable, while the human variety is, at best, reducible only, would seem to make it imperative that the cattle disease should receive prompt and vigorous attention by all agencies and societies that aim at this scourge. The diseases that are generally transmitted from person to person, as contrasted with those that depend primarily upon some intermediate host or inanimate vehicle, are more difficult to control, for we can take any measures we choose in combating the microbes in the latter sources, while infected human beings must be treated with due regard to personal liberties, and they are willful agents, who must to some extent mingle with other persons. So cows, and food products derived from these animals, are amenable to any legislation we may choose to enact and enforce, or any specific treatment any owner may choose to practice. The human type of bacillus—almost ubiquitous in man—is kept within bounds chiefly in proportion to the degree of intelligent care which the patient uses in regard to the oral discharges, for he is only slightly responsible to legislation and enforced treatment.

Tuberculosis in cattle was recognized by Koch in 1882 in his early work on tuberculosis. He believed at that time that the microbic agent in the two hosts was identical, and this view was generally accepted until 1896, when Theobald Smith described certain striking differences, which have since that time been amplified. The professional world was startled in 1901 at the announcement by Koch that human and bovine tuberculosis were distinct entities, and that there was practically no danger to man from the existence of the disease in cattle. This stimulated a tremendous amount of work in many countries, which has led to the unanimous conclusion that bovine tuberculosis not only may be transmitted, but actually is frequently the cause of the disease in man.

The bovine bacillus resembles the human type in general, but tends to be a somewhat stouter, more solid staining organism. It is more virulent for animals ordinarily used in the laboratory, particularly the rabbit, and upon culture